U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

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MR155002

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 518	2 Figgal Vegs Covered From:		
1. File Number 0 -	2. Fiscal Year Covered From:		
	1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name James Brown	Name Ironworkers Local 7		
	Labor Organization File Number 033-092		
P.O. Box, Bldg., Room No., if any P.O. Box 7	P.O. Box, Building and Room Number, if any P.O. Box 7		
Street 195 Old Colony Avenue	Street 195 Old Colony Avenue		
City South Boston	City South Boston		
State Massachusetts ZIP Code + 4 02127	State Massachusetts ZIP Code +4 02127		
5. Position in labor organization. President and Business Manage			
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu	se or minor child directly or indirectly had any of the following interests sions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name and address of Employer (including trade name, if any). Name	7.a. Nature of Interest, Transaction, or Income.		
	7.a. Nature of Interest, Transaction, or Income.		
Name			
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.		
Name Trade Name, if any:			
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any			
Name Trade Name, if any. P.O. Box, Bldg., Room No., if any Street			
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City	7.b. Amount.		
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.b. Amount. Perjury and other applicable penalties of the law, that all of the information and documents), has been examined by the signatory and is, to the best of the		
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Signature and verification. The undersigned declares, under penalty of f submitted in this report (including the information contained in any accompany)	7.b. Amount. Perjury and other applicable penalties of the law, that all of the information and documents), has been examined by the signatory and is, to the best of the		
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Signa 15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany) undersigned's knowledge and belief, true, correct, and complete. (See the second	7.b. Amount. Perjury and other applicable penalties of the law, that all of the information and documents), has been examined by the signatory and is, to the best of the tion on penalties in the instructions.)		

Name of Person Filing James Brown	File Number U-
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is activally any part of which consists of buying from or selling or leasing directly or incidealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business yely seeking to represent, or lirectly to, or otherwise
8. Name and address of Business (including trade name, if any). Name Iron Workers District Council LMCT Trade Name, if any: P.O. Box, Bldg., Room No., if any P.O. Box 96 Street 191 Old Colony Avenue City South Boston State Massachusetts ZIP Code + 4 02127	9. Business deals with: a. Labor Organization b. Trust c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	Iron Workers District Council LMCT is a Taft-Hartley Trust that is funded from contributions made pursuant to collective bargaining agreements between Iron Workers Local 7 and various signatory construction employers.
Street	
City	11.b. Approximate dollar value of such dealing.
State ZIP Code + 4	Meeting related meals and lodging and scholarship for attendance at work-related University Program.
	12.b. Amount. \$5,330
	esclassificace, succession production and control in the control i
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

Name of Person Filing James Brown File Num	er U-
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Local 7 Apprentice Training Committee	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 195 Old Colony Avenue	c. Employer	
City South Boston		
State Massachusetts ZIP Code + 4 02127		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Local 7 Apprentice Training Committee is a Taft-Hartley Trust that is funded from contributions made pursuant to collective bargaining agreements	
Trade Name, if any:	between Iron Workers Local 7 and various signatory construction employers.	
P.O. Box, Bldg., Room No., if any		
Street		
City		AND DESCRIPTION OF THE PERSON NAMED IN COLUMN
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	energy
	Meeting related travel, meals and lodging.	
	12.b. Amount. \$2,40	12

Name of Person Filing James	Brown	File Number U -

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Freedom Capital Management Trade Name, if any: P.O. Box, Bldg., Room No., if any	a. Labor Organization b. Trust	
Street One Beacon Street City Boston State Massachusetts ZIP Code + 4 02108	c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Iron Workers District Council Pension Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 161 Granite Avenue City Dorchester	Freedom Capital is an investment man that provided services to the Iron W Council Pension Fund.	agement company Jorkers District
State Massachusetts ZIP Code + 4 02124	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received. Meeting related meal.	
	12.b. Amount.	\$65

Name of Person Filing James	Brown	File Number U-
Name of Person Filing James	Brown	File Number U-

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name James M. Langan, Jr.	a. Labor Organization
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	b. Trust
Street 33 Broad Street	c. Employer
City Boston	
State Massachusetts ZIP Code + 4 02109	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Iron Workers District Council H&W Fund	Mr. Langan is the attorney for Taft-Hartley Trust Funds that are associated with Iron Workers Local 7.
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street 161 Granite Avenue	
City Dorchester	
State Massachusetts ZIP Code + 4 02124	11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received.
	Meeting related meal.
	12.b. Amount. \$78

Name of Person Filing James Brown	File Number U-
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Iron Workers Loc. 7 Springfield Annuity Fund	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 164 Switzer Avenue	c. Employer	
City Springfield		
State Massachusetts ZIP Code + 4 01109		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Iron Workers Local 7 Springfield Annual Taft-Hartley Trust that ws funded from contributions made pursuant to collect	om ctive
Trade Name, if any:	bargaining agreements between Iron Wand various signatory construction en	orkers Local 7
P.O. Box, Bldg., Room No., if any		unio de la companya d
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	nickey gen zijdinov en digiri om keyrijdin og var gennekkom ur 1990 kildinist i Hesinist i Hesinist
	12.a. Nature of interest held or income received.	degles suivident statisticum en statisticum suivident productivite suivident (H1500 (H
	Meeting related meal.	
		nakana aina kaliji (K. 170 k. la besir 170 k.). Sain Nobel etin K. 170 k.) aina kali kali kali kali kali kali
	12.b. Amount.	\$58